

AUTO CR - LOG SUMMARY #1056317

TYPE: INFO

Incident Finding / Overall Case Finding

Description of Incident	Finding	Entered By	Entered Date
It is reported that the subject defeated his arrest in that, as the subject was attempted to be placed into custody, the subject snatched away from the involved officer and violently threw his body around at which time, the involved officer deployed his taser to take control of the subject and placed him into custody.	(None Entered)		

Reporting Party Information

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party			003 /	SERGEANT OF POLICE	F	WHI		

Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
14-AUG-2012 11:23 - 14-AUG-2012 11:23		0331	003	303 - SIDEWALK	

Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
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Other Involved Parties

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Involved Member	GREER, SAMANTHA D	19601						
NON-CPD	Victim/Subject			003 /	POLICE OFFICER	F	BLK		
						M	BLK		

Involved Party Associations

Role	Rep. Party Name	Related Person	Relationship
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Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N	Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Civil Suit Settled Date:	
Notify Chief Administrator?	N	Notify Chief?	
Notify Coordinator?		Notification Does Not Apply?	Y
Notification Other?	N		
Notification Comments:			

Incident Category List

Incident Category	Primary?	Initial?
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	N	Y
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	N	Y
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	Y	Y

Investigator History

Investigator	Type	Assigned Team	Assigned Date	Scheduled End Date	Investigation End Date	No. of Days
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Extension History

Name	Previous Scheduled End Date	Extended Scheduled End Date	Date Certified Letter Sent	Reason Selected	Explanation	Extension Report Date	Approved By	Approved Date	Approval Comments
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Current Allegations

Accused Name	Seq. No.	Allegation	Category	Subcategory	Finding
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Situations (Allegation Details)

Accused Name	Alleg. No.	Situation	Victim/Offender Armed?	Weapon Types	Weapon Other	Weapon Recovered?	Deceased?
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Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
ADMINISTRATIVELY CLOSED	31-AUG-2012 11:54	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
CLOSED AT C.O.P.A.	31-AUG-2012 11:54	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
PENDING ASSIGN TEAM	15-AUG-2012 03:09	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
PENDING SUPERVISOR REVIEW	15-AUG-2012 10:55	TOUSANT, LISA	INTAKE AIDE	113 /	
PRELIMINARY	15-AUG-2012 10:54	TOUSANT, LISA	INTAKE AIDE	113 /	
PRELIMINARY	15-AUG-2012 10:44	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	Need TRR
PENDING SUPERVISOR REVIEW	15-AUG-2012 06:45	TOUSANT, LISA	INTAKE AIDE	113 /	
PRELIMINARY	15-AUG-2012 06:45	TOUSANT, LISA	INTAKE AIDE	113 /	
PRELIMINARY	15-AUG-2012 06:42	TOUSANT, LISA	INTAKE AIDE	113 /	
PRELIMINARY	15-AUG-2012 02:30	CHIBE, JOHN	POLICE OFFICER	116 /	

Attachments

No.	Type	Related Person	No. of Pages	Narrative	Original in File	Entered By	Entered Date/Time	Status	Approve Content	Approve Inclusion
1	FACE SHEET					CHIBE, JOHN	15-AUG-2012 02:30			
	DOCUMENTS - INTAKE INCIDENT		5		N	TOUSANT, LISA	15-AUG-2012 06:43	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		1	X00-565441	N	TOUSANT, LISA	15-AUG-2012 06:45	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		2	GREER SAMANTHA D 14753	N	TOUSANT, LISA	15-AUG-2012 06:44	APPROVED		

Review Incident

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Review Accused

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Accused Finding History

Accused	Allegation	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Finding	Finding Comments
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Accused Penalty History

Accused	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Penalty	Penalty Comments
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Findings

Accused Name	Allegations	Category	Concur?	Findings	Comments
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FACE SHEET (Notification Date: 15-AUG-2012) - LOG #1056317

TYPE: INFO

Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	MISHLER, ELIZABETH C	590		003 /	SERGEANT OF POLICE	F	WHI		

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Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N		
Motor Vehicle (V)?		Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Notify Chief?	
Notify Chief Administrator?	N	Notification Does Not Apply?	Y
Notify Coordinator?			
Notification Other?	N		

Initial Incident Category List

Initial Incident Category	Primary?
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	N
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	N
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	Y

Assignment History

Assigned To	Assigned Team	Investigator	Assignment Date/Time	Assigned By	Reason
IPRA	CIVILIAN OFFICE OF POLICE ACCOUNTABILITY	-	15-AUG-2012 02:30	CHIBE, JOHN	

Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
ADMINISTRATIVELY CLOSED	31-AUG-2012 11:54	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
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PRELIMINARY	15-AUG-2012 02:30	CHIBE, JOHN	POLICE OFFICER	116 /	

ARREST REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653

(For use by Chicago Police Department Personnel Only)

CPD-11. 420C (REV. 6/30)

ARREST REPORTING

OFFENDER	Name: [REDACTED]	Beat: 332	Male	[REDACTED]
	DOB: [REDACTED]		Black	
INCIDENT	AGE: 42 years		5' 11"	[REDACTED]
	POB: Illinois		170 lbs	
CHARGES	DLN: [REDACTED] IL		Brown Eyes	[REDACTED]
	ARMED WITH Unarmed		Black Hair	
RECOVERED NARCOTICS	Arrest Date: 14 August 2012 23:24	TRR Completed? Yes	Total No Arrested: 1	[REDACTED]
	Location: [REDACTED]	Beat: 331	Co-Arrests	
WARRANT	Holding Facility: District 003 Lockup		Assoc Cases	[REDACTED]
	Resisted Arrest? Yes		DCFS Ward ? No	
CHARGES	1 Offense As Cited 720 ILCS 5.0/31-1-A		Dependent Children? No	[REDACTED]
	RESIST/PC OFF/CORR EMP/FRFTR			
RECOVERED NARCOTICS	Class A - Type M			[REDACTED]
WARRANT				[REDACTED]

ARREST REPORTING

VICTIM AND COMPLAINANT

Name: STATE OF ILLINOIS, P.O Greer #14753

Empl: 7040 S Cottage Grove Ave
Chicago, IL 60637
312-747-8201

Beat: 321

Female

Injured? No

Deceased? No

DOB:

Hospitalized? No

Age:

Treated and Released? No

Comments:

NON-OFFENDER(S)

ARRESTEE
VEHICLE

NO ARRESTEE VEHICLE INFORMATION ENTERED

PROPERTIES

Confiscated Properties :

All confiscated properties are recorded in the e-Track System. This system can be queried by the inventory number to retrieve all official court documents related to evidence and/or recovered properties.

PROPERTIES INFORMATION FOR [REDACTED]

NOT AVAILABLE IN THE AUTOMATED ARREST SYSTEM.

INCIDENT NARRATIVE

(The facts for probable cause to arrest AND to substantiate the charges include, but are not limited to, the following)

EVENT [REDACTED] THIS IS AN ON-VIEW ARREST BY BT 331R. IN SUMMARY A/O'S WERE AT THE LOCATION OF 2020 E. 71ST ST WITH AN OFFENDER ALREADY IN CUSTODY [REDACTED]. DURING A/O'S INVESTIGATION, OFFENDER [REDACTED] ATTEMPTED TO TAKE PROPERTY OF THE ARRESTEE (A BICYCLE). A/O PARKER #150332 GAVE VERBAL DIRECTION TO [REDACTED] TO STEP AWAY FROM THE BICYCLE AND THAT HE WOULD ASK THE ARRESTEE IF INDEED HE WANTED [REDACTED] TO TAKE POSSESSION OF SAID BICYCLE. OFFENDER [REDACTED] DISREGARDED A/O PARKER AND ATTEMPTED TO TAKE SAID BICYCLE. A/O PARKER #15032 PLACED HANDCUFFS ON OFFENDERS RIGHT WRIST, OFFENDER RESISTED A/O PARKER #15032 BY STIFFENING HIS ARMS AND PULLED AWAY FROM A/O PARKER #15032. WHILE A/O PARKER ATTEMPTED TO ARREST OFFENDER [REDACTED] OFFENDER [REDACTED] ATTEMPTED TO DEFEAT THE ARREST OF [REDACTED] A/O GREER #14753 ATTEMPTED TO PLACE C [REDACTED] INTO CUSTODY, OFFENDER [REDACTED] STIFFENED HIS ARMS AND RESISTED. A/O GREER CUFFED [REDACTED] RIGHT WRIST WHEN OFFENDER [REDACTED] SNATCHED AWAY FROM A/O GREER #14753 AND VIOLENTLY THREW HIS BODY AROUND. A/O GREER #14753 DEPLOYED TASER, AFTER A BRIEF STRUGGLE [REDACTED] AND [REDACTED] WERE PLACED INTO CUSTODY AND PROCESSED AT THE 003RD DISTRICT STATION [REDACTED] WAS TRANSPORTED TO JACKSON PARK AND REFUSED MEDICAL TREATMENT. NAME CHECK CLEAR, NO TRAP, GIPP, OR INVESTIGATIVE ALERT. SUBJECT NOT ON PROBATION OR PAROLE.

SEE WC COMMENTS SECTION FOR ADDITIONAL COMMENTS

COURT INFO

BOND INFO

Desired Court Date: 04 October 2012

Branch: 35-2 727 E 111TH ST - Room

Court Sgt Handle? No

Initial Court Date: 15 August 2012

Branch: 35-2 727 E 111TH ST - Room

Docket #:

BOND INFORMATION NOT AVAILABLE

ARREST REPORTING

REPORTING PERSONNEL

ATTESTING OFFICER:

I hereby declare and affirm, under penalty of perjury, that the facts stated herein are accurate to the best of my knowledge, information and/or belief.

Attesting Officer: #14753 GREER, S D [REDACTED] 15 AUG 2012 04 11

ARRESTING OFFICER(S):

1st Arresting Officer: #14753 GREER, S D [REDACTED] Beat 0331R

2nd Arresting Officer: #15032 PARKER, D L [REDACTED] Beat 0331R

APPROVING SUPERVISOR:

Approval of Probable Cause : #321 BRESNAHAN, L A [REDACTED] 15 AUG 2012 04 35

ARREST PROCESSING REPORT

Holding Facility: District 003 Lockup
Received in Lockup: 15 August 2012 04 46
Prints Taken: 15 August 2012 04 49
Palprints Taken: Yes
Photograph Taken: 15 August 2012 04 49
Released from Lockup:

Time Last Fed: 15 August 2012 04 59
Time Called: Phone#:
Cell #:
Transport Details : 2PO 0331R 14-AUG-2012 23 38

VISUAL CHECK OF ARRESTEE

ARRESTEE QUESTIONNAIRE

Is there obvious pain or injury? No
Is there obvious signs of infection? No
Under the influence of alcohol/drugs? No
Signs of alcohol/drug withdrawal? No
Appears to be despondent? No
Appears to be irrational? No
Carrying medication? No

Presently taking medication? No
(if female)are you pregnant?
First time ever been arrested? No
Attempted suicide/serious harm? No
Serious medical or mental problems? No
Are you receiving treatment? No

RETURN TO HOLDING FACILITY COMMENTS:

QUESTIONNAIRE REMARKS:

LOCKUP KEEPER COMMENTS:

EMERGENCY CONTACT

Name : REFUSED

Res:

Beat:

INTERVIEW LOG

NO INTERVIEWS LOGGED

VISITOR LOG

NO VISITORS LOGGED

ARREST PROCESSING REPORT

MOVEMENT LOG

MOVEMENT LOG INFORMATION NOT AVAILABLE

WC COMMENTS

Watch Commander Comments:

#376 Mc Guire, Terrence J [REDACTED]

15 AUG 2012 06 00

sent to court due to combative nature of crime and self-admitted member of the gangster disciples

REL w/o CHARGING

DOES NOT APPLY TO THIS ARREST

PROCESSING PERSONNEL

ARRESTEE PROCESSING PERSONNEL:

Beat

Searched By: #11593 BROWN, A T [REDACTED]

Lockup Keeper: #19971 JEFFRIES, J [REDACTED]

Fingerprinted By: #19971 JEFFRIES, J [REDACTED]

APPROVAL PERSONNEL:

Beat

Final Approval of Charges : #376 MC GUIRE, T J [REDACTED] 15 AUG 2012 06 01

TACTICAL RESPONSE REPORT/Chicago Police Department

MEMBER INVOLVED	1 DATE OF INCIDENT 14-AUG-2012		TIME 23:23:00		2 ADDRESS OF OCCURRENCE [REDACTED]				3 LOCATION CODE 304		4 BEAT/OCCUR 0331										
	5 POSITION 9161		6 LAST NAME GREER		7 FIRST NAME SAMANTHA D		8 STAR NO 14753		9 SEX <input type="checkbox"/> 01 M <input checked="" type="checkbox"/> 02 F		10 RACE CODE BLK		11 AGE [REDACTED]		12 HT 505		13 WT 146				
	14 DATE OF APPT 16-DEC-2009		15 EMPLOYEE NO [REDACTED]		16 UNIT & BEAT OF ASSIGNMENT 003 0331R		17 DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18 MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		19 MEMBER IN UNIFORM? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No										
	20 LAST NAME [REDACTED]		21 FIRST NAME [REDACTED]		22 M I <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		23 SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		24 RACE BLK		25 D O B [REDACTED]		26 HT 511		27 WT 186						
SUBJECT INFORMATION	28 ADDRESS [REDACTED]		29 TELEPHONE NO [REDACTED]		30 WAS SUBJECT ARMED? VERBAL THREAT (ASSAULT) <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No				31 SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		32 SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No										
	33 WHERE WAS MEDICAL TREATMENT OBTAINED? JACKSON PARK HOSPITAL FOUNDATION				34 BY WHOM? DR NAPOLEZ		35 CONDITION <input checked="" type="checkbox"/> 01 Apparently Normal <input type="checkbox"/> 02 Under Influence <input type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized <input type="checkbox"/> 05 Refused Medical Aid														
36 CHARGES PLACED 720 ILCS 5.0/31-1-A																		37 CB NO [REDACTED]		IR NO <input type="checkbox"/> DNA	
REASON FOR USE OF FORCE (Check all that apply)	PASSIVE RESISTER		ACTIVE RESISTER		ASSAILANT ASSAULT		ASSAILANT BATTERY		ASSAILANT DEADLY FORCE												
	DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/> STIFFENED (DEAD WEIGHT) <input checked="" type="checkbox"/> OTHER _____		FLED <input type="checkbox"/> PULLED AWAY <input checked="" type="checkbox"/> OTHER _____		IMMINENT THREAT OF BATTERY <input type="checkbox"/> OTHER _____		ATTACK WITH WEAPON <input type="checkbox"/> ATTACK WITHOUT WEAPON <input type="checkbox"/> OTHER _____		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/> WEAPON <input type="checkbox"/> OTHER _____												
MEMBER'S RESPONSE	MEMBER PRESENCE <input type="checkbox"/> VERBAL COMMANDS <input checked="" type="checkbox"/> ESCORT HOLDS <input checked="" type="checkbox"/> WRISTLOCK <input type="checkbox"/> ARMBAR <input type="checkbox"/> PRESSURE SENSITIVE AREAS <input type="checkbox"/> CONTROL INSTRUMENT <input type="checkbox"/> OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/> OTHER _____		OPEN HAND STRIKE <input type="checkbox"/> TAKE DOWN / EMERGENCY HANDCUFFING <input type="checkbox"/> OC CHEMICAL WEAPON <input type="checkbox"/> CANINE <input type="checkbox"/> TASER (Probe Discharge) <input checked="" type="checkbox"/> TASER (Contact Stun) <input checked="" type="checkbox"/> TASER (Laser Targeted) <input type="checkbox"/> TASER (Spark Displayed) <input type="checkbox"/> OTHER _____		ELBOW STRIKE <input type="checkbox"/> CLOSED HAND STRIKE/PUNCH <input type="checkbox"/> IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/> OTHER _____		KNEE STRIKE <input type="checkbox"/> KICKS <input type="checkbox"/> IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/>		FIREARM <input type="checkbox"/> OTHER _____												
	39 * OC/CHEMICAL WEAPON AUTHORIZED BY (NAME) [REDACTED]																				
WEAPON DISCHARGE INCIDENT	POSITION [REDACTED]				STAR NO [REDACTED]		UNIT [REDACTED]		40 ADDITIONAL INFORMATION [REDACTED]												
	41 WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN		44 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 06 TASER (Probe Discharge) <input checked="" type="checkbox"/> 07 OTHER <input type="checkbox"/>		42 INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors		43 LIGHTING CONDITIONS <input checked="" type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial		44 WEATHER CONDITIONS CLEAR												
	45 MAKE/MANUFACTURER [REDACTED]		46 MODEL [REDACTED]		47 BARREL LENGTH [REDACTED]		48 CALIBER/GAUGE [REDACTED]														
	49 TASER DART ID NO C310103YR		50 WEAPON SERIAL No (Include Letters) X00565441		51 CHICAGO GUN REG NO [REDACTED]		52 IL FIREARM OWNER ID NO [REDACTED]		53 HANDGUN CERTIFICATE NO [REDACTED]												
CASE INFO.	54 SPECIAL WEAPON CERTIFICATE NO [REDACTED]		55 PROPERTY INVENTORY NO [REDACTED]		56 TYPE OF AMMUNITION USED [REDACTED]		57 NO OF WEAPONS DISCHARGED BY THIS MEMBER 1		58 TOTAL NO OF SHOTS MEMBER FIRED [REDACTED]												
	59 WHO FIRED FIRST SHOT <input checked="" type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (SPECIFY) _____		60 WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO		61 NO OF CARTRIDGES/ SHOT SHELLS RELOADED [REDACTED]		62 HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 01 RT SIDE (WAIST) <input type="checkbox"/> 02 LT SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify) _____														
	63 HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (Specify) _____		64 SPECIFY METHOD/EQUIPMENT USED TO RELOAD [REDACTED]		65 DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO																
	66 DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC) [REDACTED]		67 DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT <input type="checkbox"/> 02 05 - 10 FT <input type="checkbox"/> 03 10 - 15 FT <input type="checkbox"/> 04 OVER 15 FT																		
SIGNATURES	68 PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN		69 POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY) _____																		
	72 NOTIFICATIONS (OC OR TASER INCIDENT) <input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT & W C /DIST OF OCCUR NOTIFICATIONS (FIREARM INCIDENT) <input type="checkbox"/> OEMC <input type="checkbox"/> DESK SGT & W C /DIST OF OCCUR <input type="checkbox"/> OP COMMAND <input type="checkbox"/> DET DIV Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report																				
SIGNATURES	73 REPORTING MEMBER (Print Name) GREER, SAMANTHA D				STAR/EMPLOYEE NO 14753		SIGNATURE [REDACTED]														
	74 REVIEWING SUPERVISOR (Print Name) MISHLER, ELIZABETH C																				
DATE REVIEWED 15-AUG-2012 02:07:05																					

WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM, 2) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR, 3) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING, 1) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON, 2) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON, 3) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2

75 SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☐ REFUSED

☐ UNABLE TO INTERVIEW (Specify Reason)

All cool I was just coming to my friends aid

76 WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

The Officer followed all directives and procedures Subject taken to Jackson park hospital where he refused medical attn

77 WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED

LOG NO /CRNO 1056317 OBTAINED

78 WATCH COMMANDER/OCIC (Print Name)

KINGSLEY, DALE R

SIGNATURE

[REDACTED]

DATE COMPLETED TIME

15-AUG-2012 02:33:36

79 DISTRIBUTION OF ORIGINAL TRR

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS

ATTACHMENTS - PHOTOCOPIES OF

☐ SUPPLEMENTARY REPORT

☐ I O D REPORT

80 TOTAL TRR's THIS EVENT No

☐ CASE REPORT

☐ OFFICER BATTERY REPORT

☐ CR INITIATION REPORT

1

☐ ARREST REPORT

☐ TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)

**TASER Information**

Serial # X00-565441
Model # X26
X26 Software Version 22
Dataport CD Version 17.9
Record Date Range 08/14/2012 - 08/15/2012
Computer Time Zone Central Standard Time *DST
Using Daylight Savings Time Yes

Downloaded By

Name Elizabeth Mishler
Dept CPD
Rank Sgt
Windows Version Windows XP
Report Generated 08/15/12 02:14:23 (local)

Recorded Firing Data

Seq	GMT Time	Local Time	Duration	Temp	Battery
0010	08/15/12 04:24:55	08/14/12 23:24:55	5	25	47
0011	08/15/12 04:25:01	08/14/12 23:25:01	5	25	47
0012	08/15/12 04:25:07	08/14/12 23:25:07	5	25	46

Recorded X26 Time Changes

Seq	GMT Time	Local Time	Change Type
0001	Incomplete Time Change Record		
0002	10/25/10 19:06:00	10/25/10 14:06:00	FROM
0003	10/25/10 19:06:00	10/25/10 14:06:00	TO
0004	04/05/11 17:02:07	04/05/11 12:02:07	FROM
0005	04/05/11 16:50:16	04/05/11 11:50:16	TO
0006	04/15/12 12:12:47	04/15/12 07:12:47	FROM
0007	04/15/12 12:02:36	04/15/12 07:02:36	TO
0008	04/27/12 14:27:43	04/27/12 09:27:43	FROM
0009	04/27/12 14:38:37	04/27/12 09:38:37	TO

End of Report.